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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| LP | POZ./MAG. | MARKA | NR REJ. | DATA USUNIĘCIA | ORGAN USUW.NR DYSPOZYCJI | CZASOOKRESY | LICZBA DNI/ STAWKA ZŁ | KWOTA ZA USUNIĘCIE POJAZDU | RAZEM |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |